

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE   |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION         |          |        |        |
| O.I.P.E. CLASSIFIER       |          |        |        |
| FORMALITY REVIEW          | TL       | 1070   | 8/3/02 |
| RESPONSE FORMALITY REVIEW | LI       | 1106   | 1/3/02 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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